



January 27, 2015

Dear Medical Director:

The American Academy of Pediatrics (AAP), representing over 62,000 pediatricians, pediatric medical sub-specialists and pediatric surgical specialists dedicated to the health, safety, and well-being of infants, children, adolescents and young adults, is writing to provide clarification and advocate for coverage and payment for the new Brief behavioral/emotional assessment CPT code, 96127.

Effective January 1, 2015, there is a new CPT code with published Medicare Resource-Based Relative Value Scale (RBRVS) relative value units (RVUs) for emotional/behavioral assessment (CPT code 96127). Since this code differs from CPT code 96110 (developmental screening) it is important to note how these services are to be reported. Since neither code requires that a physician or other qualified health care professional perform the service, the physician may provide direct supervision for *clinical staff* to administer the assessment (96127) or screening (96110). In addition, both codes require that the assessment and screening instruments be standardized, and both codes are reported “per instrument”.

Further, it is acceptable to report both codes in addition to preventive medicine service codes. Proposed National Correct Coding Initiative (NCCI) edits initially precluded the reporting of CPT code 96127 with any evaluation and management (E/M) service other than a preventive medicine service. However, the AAP successfully advocated that NCCI revise its policy to allow a modifier to override the edit. We urge that your claims systems follow suit and allow a modifier to override the NCCI edit. Therefore, when a significant and separately identifiable office or other outpatient E/M service (CPT codes 99201-99215) is performed in addition to a standardized emotional/behavioral assessment, both codes would be reported, with modifier 25 appended to the E/M code. Attached is a recent AAP News article providing guidance on when to report CPT code 96127.

It is also important to note that, per CPT “Vaccine/toxoid products, immunization administrations, ancillary studies involving laboratory, radiology, other procedures, or screening tests (eg, vision, hearing, developmental) identified with a specific CPT code are reported separately.” (*CPT Professional Edition, 2015, pg. 36*). This language exists because CPT recognizes that these separately identifiable procedures *are not included* under the preventive medicine service codes and need to be reported and paid for separately. Therefore, payers are strongly urged to pay appropriately for emotional/behavioral assessment and developmental screening as separately reported service(s), apart from the reported office visit.

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January 27, 2015
Page 2

We look forward to your response on your coverage and payment policy for CPT code 96127. If you have questions or need additional information, please contact Lou Terranova, Senior Health Policy Analyst at lterranova@aap.org or 847-434-7633.

Sincerely,

/S/

Sandra G. Hassink, MD, FAAP
President

SGH/lt

Attachment: AAP News article: *Coding for emotional/behavioral assessment vs. developmental assessment*